

41
TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

7

Application Number	10/052,905
Filing Date	November 2, 2001
First Named Inventor	Schwendner, Susan
Art Unit	1614
Examiner Name	Frederick F. Krass

Attorney Docket Number 018781-007210US

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1614-2900

ENCLOSURES (Check all that apply)

Fee Transmittal Form
 Fee Attached
 Amendment/Reply
 After Final
 Affidavits/declaration(s)
 Extension of Time Request
 Express Abandonment Request
 Information Disclosure Statement
 Certified Copy of Priority Document(s)
 Response to Missing Parts/ Incomplete Application
 Response to Missing Parts under 37 CFR 1.52 or 1.53

Drawing(s)
 Licensing-related Papers
 Petition
 Petition to Convert to a Provisional Application
 Power of Attorney, Revocation Change of Correspondence Address
 Terminal Disclaimer
 Request for Refund
 CD, Number of CD(s)

After Allowance Communication to Group
 Appeal Communication to Board of Appeals and Interferences
 Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
 Proprietary Information
 Status Letter
 Other Enclosure(s)
(please identify below):

Return Postcard;
References (15).

Remarks

The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Townsend and Townsend and Crew LLP Frank J. Mycroft	
Signature		
Date	December 15, 2003	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Jose Luna		
Signature		Date	December 15, 2003

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 180

Complete if Known

Application Number	10/052,905
Filing Date	November 2, 2001
First Named Inventor	Schwendner, Susan
Examiner Name	Frederick F. Krass
Art Unit	1614
Attorney Docket No.	018781-007210US

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other	<input type="checkbox"/> None	
<input checked="" type="checkbox"/> Deposit Account:					
Deposit Account Number	20-1430				
Deposit Account Name	Townsend and Townsend and Crew LLP				
The Director is authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input checked="" type="checkbox"/> Credit any overpayments				
<input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)					
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.					
FEE CALCULATION					
1. BASIC FILING FEE					
Large Entity	Small Entity				
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid		
1001 770	2001 385	Utility filing fee			
1002 340	2002 170	Design filing fee			
1003 530	2003 265	Plant filing fee			
1004 770	2004 385	Reissue filing fee			
1005 160	2005 80	Provisional filing fee			
SUBTOTAL (1) (\$)					
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE					
Fee from below					
Total Claims	Extra Claims	X			Fee Paid
Independent Claims		X			
Multiple Dependent		X			
Large Entity	Small Entity				
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid		
1202 18	2202 9	Claims in excess of 20			
1201 86	2201 43	Independent claims in excess of 3			
1203 290	2203 145	Multiple dependent claim, if not paid			
1204 86	2204 43	** Reissue independent claims over original patent			
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2) (\$)					

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)					
3. ADDITIONAL FEES					
Large	Entity	Small	Entity		
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive – unavoidable	
1453	1,330	2453	665	Petition to revive – unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Petitions related to provisional applications	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify) _____					
*Reduced by Basic Filing Fee Paid				SUBTOTAL (3) (\$180)	

SUBMITTED BY					
Complete (if applicable)					
Name (Print/Type)	Frank J. Mycroft	Registration No. (Attorney/Agent)	46,946	Telephone	925-472-5000
Signature				Date	December 15, 2003

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Alexandria, VA 22313-1450

On December 15, 2003

TOWNSEND and TOWNSEND and CREW LLP

By: Joe J.

PATENT
Attorney Docket No.: 018781-007210US
Client Reference No.: T00-023-1



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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Susan Schwendner
Pieter Timmermans

Application No.: 10/052,905

Filed: November 2, 2001

For: COMBINATION THERAPY
USING
PENTAFLUOROBENZENESULFONA
MIDES AND ANTINEOPLASTIC
AGENTS

Examiner: Frederick F. Krass

Art Unit: 1614

**SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER 37
CFR §1.97 and §1.98**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on the attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are enclosed.

It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

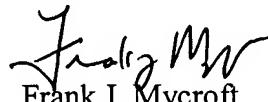
As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no

representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

This IDS is being filed before the mailing date of the final Office Action or Notice of Allowance.

Please charge the IDS fee of \$180 to Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Frank J. Mycroft
Reg. No. 46,946

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, California 94111-3834
Tel: 925-472-5000
Fax: 925-472-8895
FJM:jvl

60098258 v2



Institute for form 1449A/PTO				<i>Complete if Known</i>	
				Application Number	10/052,905
				Filing Date	November 2, 2001
				First Named Inventor	Schwendner, Susan
				Art Unit	1614
				Examiner Name	Frederick F. Krass
Sheet	1	of	2	Attorney Docket Number	018781-007210US

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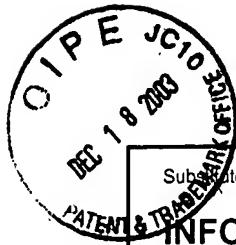
U.S. PATENT DOCUMENTS+					
Examiner Initials*	Cite No. ¹	Document Number Number Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	1.	5,464,826 A	11-17-1995	Grindley et al.	
	2.	6,153,585 A	11-28-2000	Rubenstein et al.	
	3.	6,211,167 B1	04-03-2001	Houze	
	4.	6,316,484 B1	11-13-2001	Flygare et al.	
	5.	6,465,448 B1	10-15-2002	Gerson et al.	
	6.	6,528,513 B2	03-04-2003	Cushing et al.	
	7.	6,583,165 B2	06-24-2003	Houze	
	8.	6,630,513 B1	10-07-2003	Rubenstein et al.	
	9.	2002/0143036 A1	10-03-2002	Flygare et al.	
	10.	2003/0162817 A1	08-28-2003	Flygare et al.	
	11.	2003/0207864 A1	11-06-2003	Houze	
	12.	USSN 08/605,431	N/A (Filed 02-22-1996)	Flygare et al.	

FOREIGN PATENT DOCUMENTS							
Examiner Initials*	Cite No. ¹	Foreign Patent Document		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³	Number ⁴ Kind Code ⁵ (if known)				
	13.	WO	98/05315 A1	02-12-1998	Tularik, Inc.		<input type="checkbox"/>
	14.	WO	00/61142 A1	10-19-2000	Dana-Farber Cancer Inst.		<input type="checkbox"/>
							<input type="checkbox"/>

Examiner Signature		Date Considered
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² Kind Codes of U.S. Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

60098258 v2



Substitute for form 1449B/PTO				Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT					
(use as many sheets as necessary)					
Sheet	2	of	2		
Attorney Docket Number	018781-007210US				

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NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	15.	ELI LILLY AND COMPANY; "Gemzar (Gemcitabine HCI) for Injection" PV 4061 AMP Eli Lilly and Company; Indianapolis, IN 46285, USA 20pages (2003).	

Examiner Signature		Date Considered	
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¹EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

²Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.